



## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

in re A	application of:	)	
	••	:	Examiner: R. Fiegle
ATSU	SHI DATE	)	
	10/671,785	:	Group Art Unit: 2183
Application No.: 10/671,786		)	•
		:	
Filed:	September 29, 2003	)	
		:	
For:	PROCESSOR SYSTEM WITH	)	
	BUILT-IN PROCESSOR,	:	
	MEMORY CONTROLLER AND	)	,
	EXTERNAL BUS	:	
	INTERFACE	)	February 5, 2007

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **AMENDMENT**

Sir:

In response to the Office Action dated October 5, 2006, the term for responding to which having been extended to February 5, 2007 by the accompanying Petition For Extension Of Time, please amend the above-identified application as follows:

I hereby certify that this correspon United States Postal Service as first- to: Commissioner for Patents, P. O. 1450 on	class mail in an envelope addressed
February 5, 2	007
(Date of Dep	osit)
John D. Magluyan (	Reg. No. 56,867)
(Name of Attorney	y for Applicant)
The D. Mogh	February 5, 2007
Signature	Date of Signature

FW/

In re Application of:

, ATSUSHI DATE

Application No.: 10/671;786

Filed: September 29, 2003

For: PROCESSOR SYSTEM WITH BUILT-IN PROCESSOR, MEMORY CONTROLLER

AND EXTERNAL BUS INTERFACE

Docket No.

03500.017602.

Examiner: R. Fiegle

Group Art Unit: 2183

Date: February 5, 2007

THE COMMISSIONER FOR PATENTS P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 7	MINUS	<b>**</b> 20	= 0	x \$25 \$50	0
INDEP. CLAIMS	1	MINUS	***	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				-0-		

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed
to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-
1450 on February 5, 2007
(Date of Deposit)

John D: Magluyan (Reg. No. 56,867)
(Name of Attorney for Applicant)

February 5, 2007

Signature

Date of Signature

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
X	A check in the amount of \$120.00 to cover the fee for a one-month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa, CA office at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	John D. Magluyan Attorney for Applicant Registration No. 56,867
30 R New	ZPATRICK, CELLA, HARPER & SCINTO Lockefeller Plaza Y York, New York 10112-3800 imile: (212) 218-2200

Form #120

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